

REMARKS

Claims 1-10 are all the claims pending in the application. Claims 1-10 are rejected.

Preliminary Matters

Applicants thank the Examiner for acknowledging Applicant's claim to priority and receipt of the priority documents.

Applicants further thank the Examiner for returning signed and initialed copies of the PTO Forms SB/08 that accompanied the Information Disclosure Statements filed January 5, 2005 and May 23, 2005.

Specification Objection

The disclosure is objected to because of the following informalities: Figures 1A and 1B are lacking brief descriptions.

Applicants hereby amend the Specification in order to cure the noted deficiency.

Claim Rejections - 35 U.S.C. § 112

Claim 4 is rejected under 35 U.S.C. § 112, second paragraph, as being indefinite for failing to particularly point out and distinctly claim the subject matter which Applicant regards as the invention.

Applicants hereby amend claim 4 in order to cure the noted deficiency.

Claim Rejections - 35 U.S.C. § 102(b)

Claims 1-3,5-7 and 10 rejected under 35 U.S.C. 102(b) as being anticipated by EP '907 (EP 0 081 907 A1).

The Examiner asserts that EP '907 reference discloses a tracheostomy cannula mounting comprising a planar sheet (11,12) with an associated channel 20, wherein the sheet includes an adhesive layer that is comprised of tacky gel-type materials such as gum, etc.

In regard to claim 10, the Examiner asserts that the method as claimed would be inherent during normal use and operation of the device.

Applicants hereby traverse the rejection. The EP '907 patent fails to disclose the insertion of a cannula into an aperture, or that the aperture is "of suitable size and shape to engage a channel portion of a tracheostoma cannula in interference fit". Therefore, Applicants respectfully request that the 102(b) rejection of independent claim 1 be withdrawn.

Claims 2-10 are allowable at least by virtue of their respective dependencies, direct or indirect, from claim 1.

Claim Rejections - 35 U.S.C. § 103

Claims 4 and 8 are rejected under 35 U.S.C. § 103(a) as being unpatentable over EP '907 in view of Kaiser '237 (U.S. Patent No. 4,711,237).

Claims 4 and 8 are dependent from claim 1. Because EP '907 fails to disclose all of the elements of claim 1, and because Kaiser fails to cure the deficiencies noted with respect to claim 1, claims 4 and 8 are patentable over the applied art.

Claims 1 and 9 are rejected under 35 U.S.C. § 103(a) as being unpatentable over Bridge '011 (U.S. Patent No. 5,464,011) in view of EP '907.

The Bridge reference discloses a tracheostoma cannula device 160 (see Figure 9) with associated flange portion, but does not disclose use of a mounting. The EP '907 reference discloses another tracheostoma device (supra) that utilizes a mounting (supra) in order to provide an enhanced sealing interface. The Examiner asserts that it would have been obvious to one of ordinary skill in the art at the time the invention was made to utilize a mounting with the cannula device of Bridge in view of the teachings of the EP '907 to provide an enhanced sealing interface.

Applicants respectfully submit that claims 1 and 9 are patentable over the Examiner's proposed combination. With respect to claims 1 and 9, the EP '907 patent teaches the use of a coupling element in addition to an adhesive seal, as well as a flexible microporous tape affixed to this coupling element, to assist in attaching the seal. (see page 4, line 1-17). However, Applicants respectfully submit that it would not have been obvious to one having ordinary skill in the art to substitute a cannula for the coupling element and microporous tape. EP '907's purpose is to provide sealing means for abdominal stomas so that fluid can be withdrawn from a patient's body. It is designed to be applied to a differently-shaped section of a patient, and necessarily has different dimensions from the present invention. Therefore, Applicants submit that a person having ordinary skill in the art would not have found it obvious to apply the seal from EP '907 for a tracheostomy purpose, i.e. substituting a tracheal cannula for the coupling element and microporous tape, to deliver air and fluids. Bridge '011, which only discloses a tracheostomy tube, does not cure the deficiency of EP '907 with regard to claims 1 and 9.

Therefore, claims 1 and 9 are patentable over the Examiner's proposed combination.

Withdrawal of the rejection is respectfully requested.

New Claims

Applicants hereby add new claim 12, which depends ultimately from claim 1. New claim 12 is patentable at least by virtue of its dependency from claim 1.

Conclusion

In view of the above, reconsideration and allowance of this application are now believed to be in order, and such actions are hereby solicited. If any points remain in issue which the Examiner feels may be best resolved through a personal or telephone interview, the Examiner is kindly requested to contact the undersigned at the telephone number listed below.

The USPTO is directed and authorized to charge all required fees, except for the Issue Fee and the Publication Fee, to Deposit Account No. 19-4880. Please also credit any overpayments to said Deposit Account.

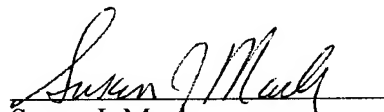
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